

For the year Jan. 1–Dec. 31, 2011, or other tax year beginning		, 2011, ending		, 20		See separate instructions.
Your first name and initial		Last name		Your social security number		
Samuel P		Taxpayer		123-45-6789		
If a joint return, spouse's first name and initial		Last name		Spouse's social security number		
Felicity Q		Taxpayer		432-19-8765		
Home address (number and street). If you have a P.O. box, see instructions.				Apt. no.		<div>▲ Make sure the SSN(s) above and on line 6c are correct.</div> <div> <div>Presidential Election Campaign</div> <div>Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.</div> <div> <input checked="" type="checkbox"/> You <input checked="" type="checkbox"/> Spouse </div> </div>
789 Tuxedo Drive						
City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).						<div>Presidential Election Campaign</div> <div>Check here if you, or your spouse if filing jointly, want \$3 to go to this fund. Checking a box below will not change your tax or refund.</div> <div> <input checked="" type="checkbox"/> You <input checked="" type="checkbox"/> Spouse </div>
Bronxville NY 10708						
Foreign country name		Foreign province/county		Foreign postal code		

Filing Status

1 ☐ Single

2 ☒ Married filing jointly (even if only one had income)

3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶

4 ☐ Head of household (with qualifying person). (See instructions.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶

5 ☐ Qualifying widow(er) with dependent child

Check only one box.

Exemptions

6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a

b ☒ Spouse

c Dependents:

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> if child under age 17 qualifying for child tax credit (see instructions)
Cyril T	Taxpayer	123-45-1234	Son	<input type="checkbox"/>
Heidi W	Taxpayer	123-23-2345	Daughter	<input checked="" type="checkbox"/>
Sydney D	Taxpayer	123-54-9876	Parent	<input type="checkbox"/>
				<input type="checkbox"/>

Boxes checked on 6a and 6b

No. of children on 6c who:

• lived with you

• did not live with you due to divorce or separation (see instructions)

Dependents on 6c not entered above

Add numbers on lines above ▶

2

2

1

5

<div>Income</div> <div>Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.</div> <div>If you did not get a W-2, see instructions.</div> <div>Enclose, but do not attach, any payment. Also, please use Form 1040-V.</div>	7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	72,000.		
	8a	Taxable interest. Attach Schedule B if required	8a	327.		
	b	Tax-exempt interest. Do not include on line 8a	8b			
	9a	Ordinary dividends. Attach Schedule B if required	9a	450.		
	b	Qualified dividends	9b	425.		
	10	Taxable refunds, credits, or offsets of state and local income taxes	10	400.		
	11	Alimony received	11			
	12	Business income or (loss). Attach Schedule C or C-EZ	12	80,486.		
	13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ <input type="checkbox"/>	13	572.		
	14	Other gains or (losses). Attach Form 4797	14			
15a	IRA distributions	15a		b Taxable amount	15b	
16a	Pensions and annuities	16a		b Taxable amount	16b	
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E	17				
18	Farm income or (loss). Attach Schedule F	18				
19	Unemployment compensation	19				
20a	Social security benefits	20a		b Taxable amount	20b	
21	Other income. List type and amount	21				
22	Combine the amounts in the far right column for lines 7 through 21. This is your total income ▶	22	154,235.			

Adjusted Gross Income	23	Educator expenses	23		
	24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24		
	25	Health savings account deduction. Attach Form 8889	25		
	26	Moving expenses. Attach Form 3903	26		
	27	Deductible part of self-employment tax. Attach Schedule SE	27	5,685.	
	28	Self-employed SEP, SIMPLE, and qualified plans	28	14,960.	
	29	Self-employed health insurance deduction	29		
	30	Penalty on early withdrawal of savings	30		
	31a	Alimony paid b Recipient's SSN ▶ 123-12-1234	31a	9,000.	
	32	IRA deduction	32		
33	Student loan interest deduction	33			
34	Tuition and fees. Attach Form 8917	34			
35	Domestic production activities deduction. Attach Form 8903	35			
36	Add lines 23 through 35	36	29,645.		
37	Subtract line 36 from line 22. This is your adjusted gross income ▶	37	124,590.		

Form **1040** (2011)

**SCHEDULE A
(Form 1040)**Department of the Treasury
Internal Revenue Service (99)**Itemized Deductions**

OMB No. 1545-0074

2011Attachment
Sequence No. **07**▶ **Attach to Form 1040.**▶ **See Instructions for Schedule A (Form 1040).**

Name(s) shown on Form 1040

Samuel P & Felicity Q Taxpayer

Your social security number

123-45-6789

**Medical
and
Dental
Expenses****Caution.** Do not include expenses reimbursed or paid by others.

1	Medical and dental expenses (see instructions)	1	17,111.	
2	Enter amount from Form 1040, line 38 2 124,590.			
3	Multiply line 2 by 7.5% (.075)	3	9,344.	
4	Subtract line 3 from line 1. If line 3 is more than line 1, enter -0-	4	7,767.	

**Taxes You
Paid****5 State and local (check only one box):**

- a** ☒ Income taxes, or } **5** 5,346.
- b** ☐ General sales taxes }

6 Real estate taxes (see instructions) **6** 12,600.**7** Personal property taxes **7****8** Other taxes. List type and amount ▶ **8****9** Add lines 5 through 8 **9** 17,946.**Interest
You Paid****Note.**
Your mortgage
interest
deduction may
be limited (see
instructions).

10	Home mortgage interest and points reported to you on Form 1098	10	5,700.	
11	Home mortgage interest not reported to you on Form 1098. If paid to the person from whom you bought the home, see instructions and show that person's name, identifying no., and address ▶	11		
12	Points not reported to you on Form 1098. See instructions for special rules	12		
13	Mortgage insurance premiums (see instructions)	13		
14	Investment interest. Attach Form 4952 if required. (See instructions.)	14		
15	Add lines 10 through 14	15	5,700.	

**Gifts to
Charity**If you made a
gift and got a
benefit for it,
see instructions.

16	Gifts by cash or check. If you made any gift of \$250 or more, see instructions.	16	2,400.	
17	Other than by cash or check. If any gift of \$250 or more, see instructions. You must attach Form 8283 if over \$500	17	410.	
18	Carryover from prior year	18		
19	Add lines 16 through 18	19	2,810.	

**Casualty and
Theft Losses**

20	Casualty or theft loss(es). Attach Form 4684. (See instructions.)	20		
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**Job Expenses
and Certain
Miscellaneous
Deductions**

21	Unreimbursed employee expenses—job travel, union dues, job education, etc. Attach Form 2106 or 2106-EZ if required. (See instructions.) ▶	21		
22	Tax preparation fees	22		
23	Other expenses—investment, safe deposit box, etc. List type and amount ▶	23		
24	Add lines 21 through 23	24		
25	Enter amount from Form 1040, line 38 25			
26	Multiply line 25 by 2% (.02)	26		
27	Subtract line 26 from line 24. If line 26 is more than line 24, enter -0-	27		

**Other
Miscellaneous
Deductions**

28	Other—from list in instructions. List type and amount ▶	28		
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**Total
Itemized
Deductions**

29	Add the amounts in the far right column for lines 4 through 28. Also, enter this amount on Form 1040, line 40	29	34,223.	
30	If you elect to itemize deductions even though they are less than your standard deduction, check here <input type="checkbox"/>			

SCHEDULE C
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Profit or Loss From Business
(Sole Proprietorship)

► **For information on Schedule C and its instructions, go to www.irs.gov/schedulec**
► **Attach to Form 1040, 1040NR, or 1041; partnerships generally must file Form 1065.**

OMB No. 1545-0074

2011
Attachment
Sequence No. **09**

Name of proprietor Samuel P Taxpayer		Social security number (SSN) 123-45-6789
A Principal business or profession, including product or service (see instructions) Engineering Consultants		B Enter code from instructions <div style="border: 1px solid black; padding: 2px; display: inline-block;"> ► 5 4 1 3 3 0 </div>
C Business name. If no separate business name, leave blank.		D Employer ID number (EIN), (see instr.) <div style="border: 1px solid black; height: 20px; width: 100%;"></div>
E Business address (including suite or room no.) ► 123 South Ave. City, town or post office, state, and ZIP code New Rochelle, NY 10801		
F Accounting method: (1) <input checked="" type="checkbox"/> Cash (2) <input type="checkbox"/> Accrual (3) <input type="checkbox"/> Other (specify) ►		
G Did you "materially participate" in the operation of this business during 2011? If "No," see instructions for limit on losses . <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
H If you started or acquired this business during 2011, check here <input type="checkbox"/>		
I Did you make any payments in 2011 that would require you to file Form(s) 1099? (see instructions) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
J If "Yes," did you or will you file all required Forms 1099? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Part I Income

1a Merchant card and third party payments. For 2011, enter -0-	1a	0.	
b Gross receipts or sales not entered on line 1a (see instructions)	1b	106,700.	
c Income reported to you on Form W-2 if the "Statutory Employee" box on that form was checked. Caution. See instr. before completing this line	1c		
d Total gross receipts. Add lines 1a through 1c	1d	106,700.	
2 Returns and allowances plus any other adjustments (see instructions)	2	0.	
3 Subtract line 2 from line 1d	3	106,700.	
4 Cost of goods sold (from line 42)	4		
5 Gross profit. Subtract line 4 from line 3	5	106,700.	
6 Other income, including federal and state gasoline or fuel tax credit or refund (see instructions)	6	0.	
7 Gross income. Add lines 5 and 6 ►	7	106,700.	

Part II Expenses

Enter expenses for business use of your home only on line 30.

8 Advertising	8	950.	18 Office expense (see instructions)	18	350.
9 Car and truck expenses (see instructions).	9	2,663.	19 Pension and profit-sharing plans	19	
10 Commissions and fees	10		20 Rent or lease (see instructions):		
11 Contract labor (see instructions)	11		a Vehicles, machinery, and equipment	20a	
12 Depletion	12		b Other business property	20b	8,000.
13 Depreciation and section 179 expense deduction (not included in Part III) (see instructions).	13	651.	21 Repairs and maintenance	21	525.
14 Employee benefit programs (other than on line 19)	14		22 Supplies (not included in Part III)	22	
15 Insurance (other than health)	15	2,700.	23 Taxes and licenses	23	
16 Interest:			24 Travel, meals, and entertainment:		
a Mortgage (paid to banks, etc.)	16a		a Travel	24a	6,000.
b Other	16b		b Deductible meals and entertainment (see instructions)	24b	750.
17 Legal and professional services	17	700.	25 Utilities	25	1,325.
28 Total expenses before expenses for business use of home. Add lines 8 through 27a ►	28	26,214.	26 Wages (less employment credits)	26	
29 Tentative profit or (loss). Subtract line 28 from line 7	29	80,486.	27a Other expenses (from line 48)	27a	1,600.
30 Expenses for business use of your home. Attach Form 8829 . Do not report such expenses elsewhere	30		b Reserved for future use	27b	
31 Net profit or (loss). Subtract line 30 from line 29.			31		80,486.
• If a profit, enter on both Form 1040, line 12 (or Form 1040NR, line 13) and on Schedule SE, line 2 . If you entered an amount on line 1c, see instr. Estates and trusts, enter on Form 1041, line 3 .					
• If a loss, you must go to line 32.					
32 If you have a loss, check the box that describes your investment in this activity (see instructions).					
• If you checked 32a, enter the loss on both Form 1040, line 12 , (or Form 1040NR, line 13) and on Schedule SE, line 2 . If you entered an amount on line 1c, see the instructions for line 31. Estates and trusts, enter on Form 1041, line 3 .					
• If you checked 32b, you must attach Form 6198 . Your loss may be limited.					

32a ☐ All investment is at risk.
32b ☐ Some investment is not at risk.

Part III Cost of Goods Sold (see instructions)

33	Method(s) used to value closing inventory: a <input type="checkbox"/> Cost b <input type="checkbox"/> Lower of cost or market c <input type="checkbox"/> Other (attach explanation)
34	Was there any change in determining quantities, costs, or valuations between opening and closing inventory? If "Yes," attach explanation <input type="checkbox"/> Yes <input type="checkbox"/> No
35	Inventory at beginning of year. If different from last year's closing inventory, attach explanation 35
36	Purchases less cost of items withdrawn for personal use 36
37	Cost of labor. Do not include any amounts paid to yourself 37
38	Materials and supplies 38
39	Other costs 39
40	Add lines 35 through 39 40
41	Inventory at end of year 41
42	Cost of goods sold. Subtract line 41 from line 40. Enter the result here and on line 4 42

Part IV Information on Your Vehicle. Complete this part **only** if you are claiming car or truck expenses on line 9 and are not required to file Form 4562 for this business. See the instructions for line 13 to find out if you must file Form 4562.

43	When did you place your vehicle in service for business purposes? (month, day, year) ▶
44	Of the total number of miles you drove your vehicle during 2011, enter the number of miles you used your vehicle for:
a	Business
b	Commuting (see instructions)
c	Other
45	Was your vehicle available for personal use during off-duty hours? <input type="checkbox"/> Yes <input type="checkbox"/> No
46	Do you (or your spouse) have another vehicle available for personal use?. <input type="checkbox"/> Yes <input type="checkbox"/> No
47a	Do you have evidence to support your deduction? <input type="checkbox"/> Yes <input type="checkbox"/> No
b	If "Yes," is the evidence written? <input type="checkbox"/> Yes <input type="checkbox"/> No

Part V Other Expenses. List below business expenses not included on lines 8–26 or line 30.

Professional publications	750.
Professional society dues	850.
.....	
.....	
.....	
.....	
.....	
48 Total other expenses. Enter here and on line 27a	48 1,600.

**SCHEDULE D
(Form 1040)**Department of the Treasury
Internal Revenue Service (99)**Capital Gains and Losses****► Attach to Form 1040 or Form 1040NR. ► See Instructions for Schedule D (Form 1040).
► Use Form 8949 to list your transactions for lines 1, 2, 3, 8, 9, and 10.**

OMB No. 1545-0074

2011
Attachment
Sequence No. **12**

Name(s) shown on return

Samuel P & Felicity Q Taxpayer

Your social security number

123-45-6789

Part I Short-Term Capital Gains and Losses—Assets Held One Year or Less

Complete Form 8949 before completing line 1, 2, or 3.

This form may be easier to complete if you round off cents to whole dollars.

	(e) Sales price from Form(s) 8949, line 2, column (e)	(f) Cost or other basis from Form(s) 8949, line 2, column (f)	(g) Adjustments to gain or loss from Form(s) 8949, line 2, column (g)	(h) Gain or (loss) Combine columns (e), (f), and (g)
1 Short-term totals from all Forms 8949 with box A checked in Part I	14,552.	(14,904.)		-352.
2 Short-term totals from all Forms 8949 with box B checked in Part I		()		
3 Short-term totals from all Forms 8949 with box C checked in Part I		()		
4 Short-term gain from Form 6252 and short-term gain or (loss) from Forms 4684, 6781, and 8824			4	
5 Net short-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			5	
6 Short-term capital loss carryover. Enter the amount, if any, from line 8 of your Capital Loss Carryover Worksheet in the instructions			6	()
7 Net short-term capital gain or (loss). Combine lines 1 through 6 in column (h). If you have any long-term capital gains or losses, go to Part II below. Otherwise, go to Part III on the back			7	-352.

Part II Long-Term Capital Gains and Losses—Assets Held More Than One Year

Complete Form 8949 before completing line 8, 9, or 10.

This form may be easier to complete if you round off cents to whole dollars.

	(e) Sales price from Form(s) 8949, line 4, column (e)	(f) Cost or other basis from Form(s) 8949, line 4, column (f)	(g) Adjustments to gain or loss from Form(s) 8949, line 4, column (g)	(h) Gain or (loss) Combine columns (e), (f), and (g)
8 Long-term totals from all Forms 8949 with box A checked in Part II		()		
9 Long-term totals from all Forms 8949 with box B checked in Part II	7,752.	(6,854.)		898.
10 Long-term totals from all Forms 8949 with box C checked in Part II		()		
11 Gain from Form 4797, Part I; long-term gain from Forms 2439 and 6252; and long-term gain or (loss) from Forms 4684, 6781, and 8824			11	
12 Net long-term gain or (loss) from partnerships, S corporations, estates, and trusts from Schedule(s) K-1			12	
13 Capital gain distributions. See the instructions			13	26.
14 Long-term capital loss carryover. Enter the amount, if any, from line 13 of your Capital Loss Carryover Worksheet in the instructions			14	()
15 Net long-term capital gain or (loss). Combine lines 8 through 14 in column (h). Then go to Part III on the back			15	924.

For Paperwork Reduction Act Notice, see your tax return instructions. BAA

REV 11/22/11 TTW

Schedule D (Form 1040) 2011

Part III Summary

16	Combine lines 7 and 15 and enter the result	16	572.
<ul style="list-style-type: none"> • If line 16 is a gain, enter the amount from line 16 on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 17 below. • If line 16 is a loss, skip lines 17 through 20 below. Then go to line 21. Also be sure to complete line 22. • If line 16 is zero, skip lines 17 through 21 below and enter -0- on Form 1040, line 13, or Form 1040NR, line 14. Then go to line 22. 			
17	Are lines 15 and 16 both gains? <input checked="" type="checkbox"/> Yes. Go to line 18. <input type="checkbox"/> No. Skip lines 18 through 21, and go to line 22.		
18	Enter the amount, if any, from line 7 of the 28% Rate Gain Worksheet in the instructions . . . ▶	18	
19	Enter the amount, if any, from line 18 of the Unrecaptured Section 1250 Gain Worksheet in the instructions ▶	19	
20	Are lines 18 and 19 both zero or blank? <input checked="" type="checkbox"/> Yes. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). Do not complete lines 21 and 22 below. <input type="checkbox"/> No. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the Schedule D Tax Worksheet in the instructions. Do not complete lines 21 and 22 below.		
21	If line 16 is a loss, enter here and on Form 1040, line 13, or Form 1040NR, line 14, the smaller of: <div style="display: flex; align-items: center;"> <ul style="list-style-type: none"> • The loss on line 16 or • (\$3,000), or if married filing separately, (\$1,500) <div style="font-size: 3em; margin: 0 10px;">}</div> <div style="border-bottom: 1px solid black; flex-grow: 1; position: relative;"> <div style="position: absolute; right: -10px; top: -5px;">21 ()</div> </div> </div> <p>Note. When figuring which amount is smaller, treat both amounts as positive numbers.</p>		
22	Do you have qualified dividends on Form 1040, line 9b, or Form 1040NR, line 10b? <input type="checkbox"/> Yes. Complete Form 1040 through line 43, or Form 1040NR through line 41. Then complete the Qualified Dividends and Capital Gain Tax Worksheet in the instructions for Form 1040, line 44 (or in the instructions for Form 1040NR, line 42). <input type="checkbox"/> No. Complete the rest of Form 1040 or Form 1040NR.		

Your social security number

123-45-6789

6,854.

SCHEDULE SE
(Form 1040)

Department of the Treasury
Internal Revenue Service (99)

Self-Employment Tax

► **Attach to Form 1040 or Form 1040NR.**

► **See separate instructions.**

OMB No. 1545-0074

2011
Attachment
Sequence No. **17**

Name of person with **self-employment** income (as shown on Form 1040)

Samuel P Taxpayer

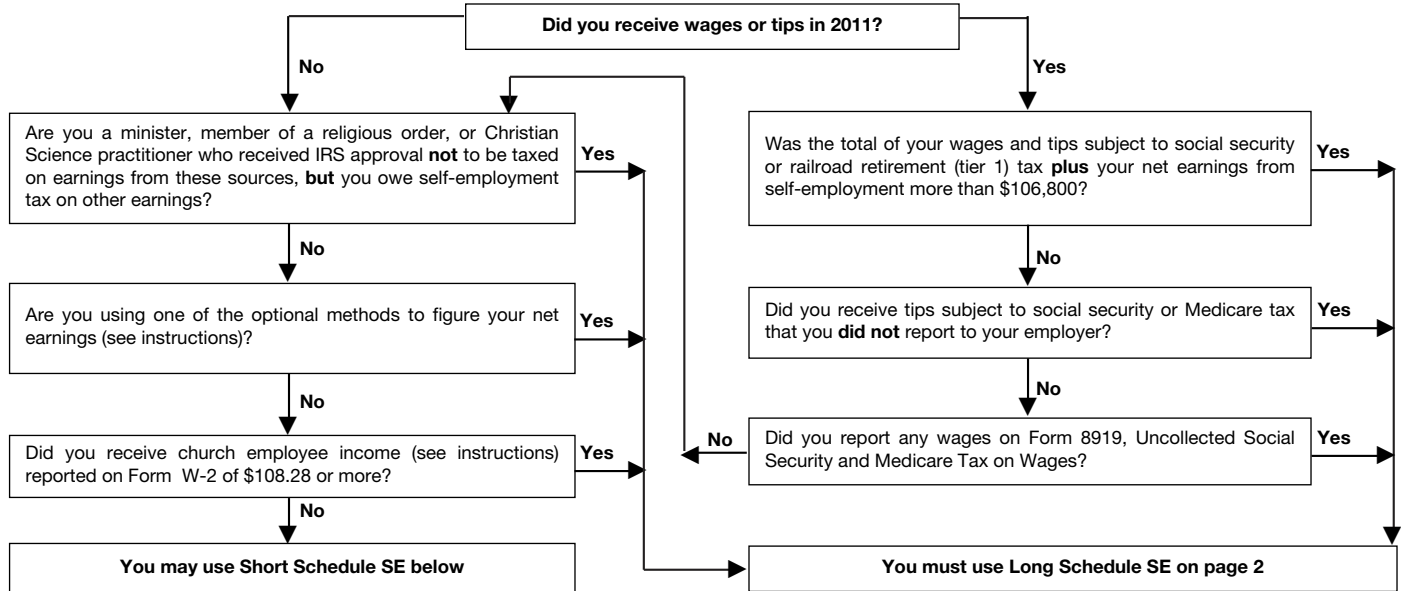
Social security number of person
with **self-employment** income ►

123-45-6789

Before you begin: To determine if you must file Schedule SE, see the instructions.

May I Use Short Schedule SE or Must I Use Long Schedule SE?

Note. Use this flowchart **only** if you must file Schedule SE. If unsure, see *Who Must File Schedule SE* in the instructions.



Section A—Short Schedule SE. Caution. Read above to see if you can use Short Schedule SE.

1a	Net farm profit or (loss) from Schedule F, line 34, and farm partnerships, Schedule K-1 (Form 1065), box 14, code A	1a	
b	If you received social security retirement or disability benefits, enter the amount of Conservation Reserve Program payments included on Schedule F, line 4b, or listed on Schedule K-1 (Form 1065), box 20, code Y	1b	()
2	Net profit or (loss) from Schedule C, line 31; Schedule C-EZ, line 3; Schedule K-1 (Form 1065), box 14, code A (other than farming); and Schedule K-1 (Form 1065-B), box 9, code J1. Ministers and members of religious orders, see instructions for types of income to report on this line. See instructions for other income to report	2	80,486.
3	Combine lines 1a, 1b, and 2	3	80,486.
4	Multiply line 3 by 92.35% (.9235). If less than \$400, you do not owe self-employment tax; do not file this schedule unless you have an amount on line 1b ►	4	74,329.
5	Self-employment tax. If the amount on line 4 is: • \$106,800 or less, multiply line 4 by 13.3% (.133). Enter the result here and on Form 1040, line 56 , or Form 1040NR, line 54 • More than \$106,800, multiply line 4 by 2.9% (.029). Then, add \$11,107.20 to the result. Enter the total here and on Form 1040, line 56 , or Form 1040NR, line 54	5	9,886.
6	Deduction for employer-equivalent portion of self-employment tax. If the amount on line 5 is: • \$14,204.40 or less, multiply line 5 by 57.51% (.5751) • More than \$14,204.40, multiply line 5 by 50% (.50) and add \$1,067 to the result. Enter the result here and on Form 1040, line 27 , or Form 1040NR, line 27	6	5,685.

**Education Credits (American Opportunity and
Lifetime Learning Credits)**

► See separate instructions to find out if you are eligible to take the credits.
► Attach to Form 1040 or Form 1040A.

OMB No. 1545-0074

2011
Attachment
Sequence No. **50**

Name(s) shown on return

Samuel P & Felicity Q Taxpayer

Your social security number

123-45-6789



You cannot take both an education credit and the tuition and fees deduction (see Form 8917) for the same student for the same year.

Part I American Opportunity Credit

Caution: You **cannot** take the American opportunity credit for more than **4** tax years for the **same student**.

1	(a) Student's name (as shown on page 1 of your tax return) First name Last name	(b) Student's social security number (as shown on page 1 of your tax return)	(c) Qualified expenses (see instructions). Do not enter more than \$4,000 for each student.	(d) Subtract \$2,000 from the amount in column (c). If zero or less, enter -0-.	(e) Multiply the amount in column (d) by 25% (.25)	(f) If column (d) is zero, enter the amount from column (c). Otherwise, add \$2,000 to the amount in column (e).
	Cyril T Taxpayer	123-45-1234	4,000.	2,000.	500.	2,500.
2	Tentative American opportunity credit. Add the amounts on line 1, column (f). If you are taking the lifetime learning credit for a different student, go to Part II; otherwise, go to Part III ►					2 2,500.

Part II Lifetime Learning Credit

Caution: You **cannot** take the American opportunity credit and the lifetime learning credit for the **same student** in the same year.

3	(a) Student's name (as shown on page 1 of your tax return) First name Last name	(b) Student's social security number (as shown on page 1 of your tax return)	(c) Qualified expenses (see instructions)
4	Add the amounts on line 3, column (c), and enter the total		4
5	Enter the smaller of line 4 or \$10,000		5
6	Tentative lifetime learning credit. Multiply line 5 by 20% (.20). If you have an entry on line 2, go to Part III; otherwise go to Part IV		6

Part III Refundable American Opportunity Credit

7	Enter the amount from line 2.	7	2,500.
8	Enter: \$180,000 if married filing jointly; \$90,000 if single, head of household, or qualifying widow(er)	8	180,000.
9	Enter the amount from Form 1040, line 38, or Form 1040A, line 22. If you are filing Form 2555, 2555-EZ, or 4563, or you are excluding income from Puerto Rico, see Pub. 970 for the amount to enter	9	124,590.
10	Subtract line 9 from line 8. If zero or less, stop ; you cannot take any education credit.	10	55,410.
11	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	11	20,000.
12	If line 10 is: <ul style="list-style-type: none"> • Equal to or more than line 11, enter 1.000 on line 12 • Less than line 11, divide line 10 by line 11. Enter the result as a decimal (rounded to at least three places) 	12	1.000
13	Multiply line 7 by line 12. Caution: If you were under age 24 at the end of the year and meet the conditions on page 4 of the instructions, you cannot take the refundable American opportunity credit. Skip line 14, enter the amount from line 13 on line 15, and check this box <input type="checkbox"/>	13	2,500.
14	Refundable American opportunity credit. Multiply line 13 by 40% (.40). Enter the amount here and on Form 1040, line 66, or Form 1040A, line 40. Then go to line 15 below	14	1,000.

Part IV Nonrefundable Education Credits

15	Subtract line 14 from line 13	15	1,500.
16	Enter the amount from line 6, if any. If you have no entry on line 6, skip lines 17 through 22, and enter the amount from line 15 on line 6 of the Credit Limit Worksheet (see instructions)	16	
17	Enter: \$122,000 if married filing jointly; \$61,000 if single, head of household, or qualifying widow(er)	17	
18	Enter the amount from Form 1040, line 38, or Form 1040A, line 22. If you are filing Form 2555, 2555-EZ, or 4563, or you are excluding income from Puerto Rico, see Pub. 970 for the amount to enter	18	
19	Subtract line 18 from line 17. If zero or less, skip lines 20 and 21, and enter zero on line 22	19	
20	Enter: \$20,000 if married filing jointly; \$10,000 if single, head of household, or qualifying widow(er)	20	
21	If line 19 is: <ul style="list-style-type: none"> • Equal to or more than line 20, enter 1.000 on line 21 and go to line 22 • Less than line 20, divide line 19 by line 20. Enter the result as a decimal (rounded to at least three places) 	21	
22	Multiply line 16 by line 21. Enter here and on line 1 of the Credit Limit Worksheet (see instructions) ►	22	
23	Nonrefundable education credits. Enter the amount from line 11 of the Credit Limit Worksheet (see instructions) here and on Form 1040, line 49, or Form 1040A, line 31	23	1,500.